| Effective October 1, 2003  Output  Description Record  Output  Output |  |   |              |                                  |                     |                    |   |                |                        |              |                     |                        |
|---|--|---|--------------|----------------------------------|---------------------|--------------------|---|----------------|------------------------|--------------|---------------------|------------------------|
| CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAT  |  |   |              |                                  |                     |                    |   |                |                        |              |                     |                        |
| TOTAL CLAIMS  |  |   |              |                                  |                     |                    |   | RATE           | FEE                    | 1            | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILED |                                  | NUMBER EXTRA        |                    |   | BASIC FEE      | 385.00                 | OR           | BASIC FEE           | 770.66                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | /8 minus 20= |                                  | •                   |                    | ·   | X\$ 9=         |                        | OR           | XS18=               |                        |
| INDEPENDENT CLAIMS  |  |   | 4 minus 3 =  |                                  |                     |                    |   | X43=           | <b> </b>               | OR           | -X86=               | 80                     |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |              |                                  |                     |                    |   | +145=          |                        |              | +290=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |              |                                  |                     |                    |   | TOTAL          | <u> </u>               | OR           | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II   |  |   |              |                                  |                     |                    |   | 101712         | L                      | <b>]</b> O., | OTHER               | THAN                   |
| (Column 1) (Column 2) (Column 3)  |  |   |              |                                  |                     |                    |   | SMALL          | ENTITY                 | OR           | SMALL               | ENTITY                 |
| AMENDMENT A   | A  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUME<br>PREVIC<br>PAID I | BER<br>OUSLY        | PRESENT<br>EXTRA   |   | RATE           | ADDI-<br>TIONAL<br>FEE |              | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | - 18                                      | Minus        | - 2                              | 0                   | =                  | xss   | X\$ 9=         |                        | OR           | X\$18=              |                        |
|   | Independent                                    | · '4                                      | Minus        | 4                                | <i>l</i>            | =                  |   | X43=           |                        | OR           | X86=                |                        |
| ٩   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                                  |                     |                    | ]   | . 1 45         |                        |              | ÷290=               |                        |
| DCEN Hond   |  |   |              |                                  |                     |                    |   | +145=          |                        | OR           | TOTAL               |                        |
|   |  |   |              |                                  |                     |                    |   |                |                        | ADDIT. FEE   | 10                  |                        |
|   | (Column 1) (Column 2) (Column 3                |   |              |                                  |                     |                    | ٠,  |                |                        |              |                     | 6 (0)                  |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |              | NUMI<br>. PREVIC<br>PAID I       | BER<br>DUSLY        | PRESENT<br>. EXTRA |   | RATE           | ADDI-<br>TIONAL<br>FEE |              | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 43                                      | Minus        | .20                              | >                   | - 23               |   | X\$ 9=         |                        | OR           | X\$18=              |                        |
|   | Independent                                    | . 4                                       | Minus        | 2                                | <u> </u>            | <u> </u>           | 41  | X43=           |                        | OR           | X86=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                                  |                     |                    |   | +145=          |                        | OR           | +290=               |                        |
|   |  |   |              |                                  |                     |                    |   | TOTAL          |                        |              | TOTAL<br>ADDIT, FEE | 1240                   |
|   |  | (Column 1)                                |              | (Colum                           | nn 2)               | (Column 3)         |   | ADDIT FEE      |                        |              | ADDII. FEE          |                        |
| AMENE MENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUMI<br>PREVIO<br>PAID   | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA   |   | RATE           | ADDI-<br>TIONAL<br>FEE |              | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | iotai  | <br>                                      | Minus        | **                               |                     | =                  | ֡֜֞֜֜֜֞֜֜֓֓֓֓֓֜֜֜֜֜֜֓֓֓֡֓֜֜֜֡֓֓֓֡֡֡֡֜֜֜֡֓֡֓֡֡֡֡֡֡ | X\$ 9=         | -71                    | OR           | ⊼\$18=              |                        |
|   | Independent                                    | *   | Minus        | ***                              |                     | =                  | ] <u> </u>  | X43=           |                        | OR           | X86=                |                        |
| ٩   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                                  |                     |                    | L   |                |                        |              |                     |                        |
| +145=<br>If the entry in column 1 is less than the entry in column 2 write "0" in column 3.   |  |   |              |                                  |                     |                    |   |                | <del></del>            | OR           | +290=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.  |  |   |              |                                  |                     |                    |   |                |                        |              |                     |                        |
| FORM  | A PTO-875 (Rev. 10                             | 0/03)                                     | BEST A       | VAILA                            | BLE                 | COPY               | Pate  | ent and Traden | natti Office, U        | .S. DEF      | PARTMENT OF         | COMMERCE               |

Application or Docket Number